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ABSTRACT

This paper examines the relevance of social structure, in terms of class, race, and gender, in the lives of damaged parents of low power positions who abuse or neglect their children. The predominant view in the understanding and treatment of abusive parents stresses the parent's poor childhood experiences and the "intergenerational cycle" of the problem. Despite evidence for the "classlessness" of the problem, maltreating parents seem to be overrepresented in the low power segments of the society. In addition, evidence suggests that mothers, the poor, and ethnic minorities also are overrepresented among maltreating parents. Available data points to a particular psychological profile in these parents, characterized by a sense of powerlessness, low self esteem, isolation, and dependency on welfare services. The effectiveness of individual therapy for abusive and neglectful parents is discussed, and suggestions for use of a developmental dialectical approach to therapy are addressed. Unlike the pschodynamic approach to therapy, developmental dialectics suggests that healing for damaged parents requires not only awareness of past victimization, but also of present social victimization. Several case studies illustrate some of the difficulties when damaged parents seek help from therapists. (DST)

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INTERNALIZATION OF SEXISM, RACISM & CLASSISM IN DAMAGED PARENTING: A DEVELOPMENTAL DIALECTICAL MODEL

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INTERNALIZATION OF SEXISM, RACISM & CLASSISM IN DAMAGED PARENTING: A DEVELOPMENTAL DIALECTICAL MODEL

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Encouraged by the social movements of the 1960's and 1970's, research started to clarify the relation between the personal-psychological and the social-political structure of the society. For example, studies consistently pointed to the relationship between self esteem and locus of control and one's social class (Lundberg, 1974; Veroff, Donovan & Kulka, 1981). These and other similar findings have deep implications for therapeutic work with individuals. The relation between the "healthy" individual's social standing and his/her psychological well-being has been somewhat explored (Agel, 1971).The present work examines the relevance of the social structure of the society in terms of class, race and sex, in the lives of damaged parents of low power positions in the society, who abuse or neglect their children.

The predominant view in the understanding and treatment of abusive parents has so far stressed the parent's past poor childhood experiences and the "intergenerational cycle" of the problem. It is believed that the abusive parent was mistreated as a child and therefore knows only how to maltreat her own child. A deformed character structure mediates between past and present events. Thus, the emphasis is on the interpersonal past and the problem is seen as "classless". Members of all social groups with such a background are considered to be equally

represented among damaged parents (Polansky, Chalmers, Buttenweiser & Williams, 1981; Steele,1980).

The intervention strategy that ensues from the above analysis often involves individual therapy which focuses on the parent's personality defects and her upbringing. When working with low income families, awareness of their class often takes the form of the provision of housing and welfare for them (Faller, Ziefer & Jones, 1981). If there is any consciousness of the parent's race and sex, it usually takes the form of therapist's use of this information in diagnosis and treatment plans (Hines & Boyd-Franklin, 1982). The relevance of the issues of class, race or sex in the life and professional activities of the professional is not examined and any knowledge of these issues is not discussed with the parent.

What is the evidence on the adequacy of the above understanding and treatment of damaged parents? Retrospective studies and clinical case reports of these parents on the whole support the maltreatment of them by their parents when they were young (Kotelchuck, 1982; Oliver, 1978). Thus, to the best of our knowledge, past maltreatment does seem involved in present parenting problems. But past familial experiences are not all that is negative in the lives of these parents. Available evidence suggests that mothers (Brandon, 1976; Pelton, 1981). the poor (Gil, 1970; Kotelchuck, 1982; Oliver, Cox & Buchanan, 1978) and ethnic minorities are overrepresented among maltreating parents (Gil, 1970; Child Abuse and Neglect Programs, 1977). That is not to say that most low income minority mothers maltreat

their children. There is also evidence of poor parenting among all social groups (Stone, 1979). Despite these facts, maltreating parents seem to be overrepresented in those segments who are in the low power positions in the society. The evidence for the "classlessness" of the problem is thus not strong (Pakizegi, 1985). The combination of the evidence for a maltreated personal and social past and a maltreating social present raises questions about a diagnosis and treatment plan based solely on the personal past.

Available data points to a particular psychological profile in these parents, characterized by a sense of powerlessness, low self esteem. and isolation (Elmer, 1977; Garbarino & Gilliam, 1980; Gil, 1970; Kotelchuck, 1982. Polansky, et al., 1981; Wiehe,1985). Many of these parents feel they have no control over their lives, no one cares for them and that they can count on no one. All these are characteristics that deter the parent from attaining personally and socially acceptable goals. Thus the effectiveness of traditional intervention has to be assessed with these problems and goals in mind.

While in the present social system, the immediate way to provide relief from pressing material needs might in fact be the welfare system, a long term involvement with this system exacerbates the cycle of self blame and lack of control that paralyzes these parents into depressed inaction or causes them to lash out at their own images in their children. The welfare system requires the poor to accept rudeness and long waits, both encouraging passivity. Even when caring professionals "run

interference" with the welfare system for these parents, this continues to put them in a dependent and passive position. Families have to open their lives to public scrutiny with little choice, again taking away control from them. In addition, welfare recipients have to prove repeatedly, in writing, and with documentation how inadequate they are (Bronfenbrenner, Moen, & Garbarino, 1984). The stigma of being on welfare does not escape these parents, already highly sensitized to negative evaluations in their upbringing. This is inevitable in a social system where the guarantee of basic needs is a privilege of the well off, and not a social responsibility. Finally, the intrinsic depersonalization of bureaucracy goes against the essentially personal nature of the "welfare" of people. The professionals working in the bureaucracy also gradually lose their autonomy and feel ineffective and passive (Kovel, 1981).

Little direct and systematic evidence is available on the effectiveness of individual therapy for abusive and neglectful parents. Evidence from the general field of therapy suggests that more whites are given therapy than blacks, who usually receive medication (Hines & Boyd-Franklin, 1982). Whites and people from higher socioeconomic statuses are in therapy longer and receive more insight oriented therapy than blacks and those of lower social classes. Therapy is also found to be more effective with people with verbal facility, where there is a common base of assumptions and experiences between therapist and client (Brill & Storrow, 1964; Grunebaum, Weiss, Cohler, Hartman & Gallant, 1982).

When there is funding for individual therapy for damaged parents, these low income damaged mothers of color often work with middle class white women therapists or social workers. Thus, there are often class, race and sometimes sex differences between the professionals and the parents, reducing the chances of empathy and therapeutic alliance. Many professionals have had little training in how their own class, race or sex affects their lives and their work and how the parents' social status is involved in their personal strengths and vulnerabilities. Unaware of these, therapists' support and challenge for personal development can be judgmental and inappropriate to the needs of the particular parents they are serving.

The emphasis of traditional individual therapy on static personality defects continues the negative evaluation that these parents have experienced in their families and in society. Wherever they turn, these parents continue to get negative messages about themselves. Their parents told them they were no good and probably never will be, society tells them they are second class citizens and they have to accept this structure, and therapy underlines these messages by focusing on their shortcomings and helping them to adapt to and accept the parameters of their lives.

In addition, individual therapy continues the isolation of the parent and unrealistically burdens the therapist. The low material and emotional reserves of low power position people in society means that they are highly needy. The common burnout among professionals in this field partly reflects the inadequacy

of this method as a primary or sole intervention technique with these parents.

A case might help clarify some of these points. A Hispanic welfare mother, suspected of physical and sexual abuse, asked her therapist for help in finding day care for her child. This was in the context of 24 hour a day contact with her child in an efficiency apartment. She could not afford a separate bed for the child. She had no job, no social involvements and no support systems. Her middle class white therapist could not understand why a woman with "all that time on her hands" did not want to take full care of her child and interpreted it in terms of the mother's ambivalence about being a woman and a mother.The therapist was pleased that she had been able to stall for a year in order to press the mother into examining her "personal identity problem". After a year the mother gave up hope of getting any understanding of her situation or help in finding day care , refused to see her therapist any more and shortly thereafter stopped coming to the clinic. The therapist's interpretation was that the mother's paranoid personality structure prevented her from using the help of her therapist.

The above analysis indicates that there is a need for a more complete way of working with damaged parents. A developmental dialectical approach addresses many of the issues raised above. Basically this model examines maltreating parents' present stage needs and characteristics in the context of their developmental history and in the context of the social systems of which they have been and are members of.

Greenspan's developmental structuralist model (1981) suggests that the timing and nature of parenting problems reflects the stage and need which was frustrated in the parent as a child. For example, if the parent has problems with her child's extreme dependence during infancy, it is likely that her own dependency needs were threatening to her parent when she was an infant. A developmental approach further implies that the totality of the person has to be considered as s/he changes or develops. Present stage needs and characteristics have to be addressed as well as past events in one's life. An adolescent mother has different needs and capabilities than an older mother. Cognitive capabilities and needs have to be engaged as well as emotional ones. Strengths have to recognized as well as deficiencies,and the conscious has to be addressed as well as the unconscious. All of these are in a process of development over time in the parent as well as in the child.

This developmental approach can be incorporated into and further expanded by the dialectical approach. The dialectical approach is one with a longstanding philosophical background (Hegel, 1975). However, despite the works of people such as Reich and Marcuse, its application to mainstream psychology, and developmental psychology in particular, is more recent (Buss, 1979; Riegel, 1975 & 1976). This approach stresses the integration and interpenetration of the various parts of a whole. Thus, behavior (in this case, maltreating behavior), is understood not only intrapersonally and interpersonally, and not only as a product of social, political and economic systems, but as impacting on these systems as well. While the integrity of

each level of organization (e.g. individual, society) is recognized, these levels are seen as interpenetrating and transforming of one another. Thus, the activity and agency aspect of people is emphasized as well as their being products of environmental influences. Although some things change slowly, activity, change and development are seen as the essence of people and social systems, and the product of the contradictions and asynchrony inherent within and between them. Contradictions involve the unity of opposites in and across organisms and systems. For example, the splitting of the atom makes possible both extensive destruction and great service to humankind. Or, in Piaget's theory, the contradiction between the child's intellectual structures and those of external reality, create a disequilibrium that over time leads to a new level of equilibration. While change occurs sometimes quantitatively, enough quantitative change involves a qualitative difference. For example, the interaction of increasing heat with water, transforms it into steam. Or again in Piaget's theory, the child's repeated activity with objects, leads to a qualitatively different intellectual capability.

What does this model imply for understanding maltreating parents? It suggests that the personality characteristics and interpersonal relations of these parents are inseparable from their social conditions. In this hierarchically organized society, women, ethnic minorities and low income people are dominated, oppressed and viewed as second class citizens. Through internalizing societal structures, problems and

evaluations, they see these external structures and messages as personal characteristics and problems. Despite their apparent external locus of control (Wiehe, 1985), their low self esteem and sense of powerlessness reflects a paralysis that comes from feeling overburdened with blame and responsibility for all that is wrong in their life. These feelings and characteristics, however, might be a realistic internal representation of an external reality; blame by their maltreating parents for their supposed shortcomings as children, and blame by the society for their position in that society. In addition, these characteristics simultaneously serve the purpose of maintaining the external structure. The oppressed thus become their own oppressors, absolving and reinforcing the present order of things (Lichtman, 1984; Sipe, 1984).

The present reality of racism, sexism and classism has been changing very slowly. Is there therefore no hope for these parents till the society changes? At some level that is true, but at another it is not. The question reflects a mechanistic perspective of these parents that has served to maintain them in a passive position, and perceived them mainly as recipients of social forces, denying their ability to transform themselves and society. While a healthier society would mean less emotional pain for its members, there is enough contradictions, variability and choice presently to allow for a better quality of life for these parents (Bartlett, 1982). How then can this come about?

The psychodynamic approach to therapy suggests that the process of healing necessitates the uncovering of the sources of

the parents' victimization and negative self view (Steele, 1980). However, this approach limits its analysis to one's interpersonal past. Developmental dialectics suggests that healing for damaged parents requires not only awareness of their victimization in their past family relations, but also of their social victimization. Evidence from working with victims of crimes suggests that those who are aware of the role of external factors in their victimization , sustain less emotional damage than those who solely blame themselves for the crime (Berglass, 1985).

An analysis based only on the personal past invalidates these parents' unformulated sense of injustice about their past and ongoing social devaluation. Those of us who are white, middle class and male, have more to gain from the present system. We therefore have less of an immediate need to examine it, although we too are paying a price for maintaining it. With the perception of class, race and sometimes sex differences between themselves and their therapists, damaged low income mothers of color unconsciously sense the alliance and investment of their therapist with the system .This becomes an impediment in the therapeutic alliance. The professional who has not examined her own investment in the social structure, unconsciously becomes an apologist for the present order of things, and her own place in it. A supportive and challenging therapeutic relationship thus requires that the therapist also analyze the ways her social status is involved in who she is, personally and professionally. The caring professional is thus led to social analysis and social criticism (Watts, 1961). Only this awareness enables her not to

abuse her social power (Pinderhughes, 1982).

In a therapeutic relationship where the analysis does not stop at issues which might threaten the therapist's unanalyzed and unconscious social sensitivities, the parent is supported in feeling the pain, sadness and rage that go with the victim position. Only then will the parent be free to see her own role in the network of systems. Consciousness of one's embeddedness in the network of mutually transforming personal, interpersonal and societal systems gives one a more complete and accurate picture of one's role in life. One is then neither capable of controlling everything, nor completely ineffective in influencing events. Released from total responsibility, the parent comes to understand and to take charge of her share in maintaining the status quo or in transforming her life.

Empowerment involves knowledge of one's needs and an ability to act in ways that increases the likelihood of attaining these needs. Not having had their needs properly understood and/or responded to, personally and socially, damaged parents are strangers to themselves (Helfer, 1980). Thus the therapeutic process must help parents identify and affirm their needs and clarify the social framework involved in their attainment.

Let me illustrate the above points. Casey, a black welfare mother of a toddler, was referred to a clinic because of her depression and her toddler's lack of eye contact with people. Rage, turned inward, took the form of depression and self blame for all that was wrong in her life. She blamed her weight for her boyfriend's leaving her, her feeding her son cereal for his

allergies and her going to work late for her being fired.

In the course of therapy, she gradually became aware of her needs and of how her actions were the product of as well as contributed to her situation. Taking the example of her firing from her job, she realized that her job had been boring and did not challenge her capabilities. Her way of dealing with an alienating job was to go late. In trying to understand her fear of switching jobs, Casey realized that she had unconsciously been aware that her firing coincided with a national unemployment rate of 10% in general, and higher for minorities. Hard economic times have meant layoffs, usually of minorities and women. Realistically, therefore, it was a difficult time to make a job switch. Given the economic conditions of the society, Casey's company had hired a new boss to make operations more efficient. The newly hired boss was a woman, who had to prove her toughness in a man's world. As part of doing so, she had fired several employees. Gradually the social dimensions of what had at first seemed like only a personal problem became clear. Casey was gradually more able to see her needs, her unsuccessful attempts at meeting these, and the social structures that had to be considered if she were to succeed in the future.

In contrast to a predominant focus on static personality defects,especially of ethnic low income mothers, dialectics suggests that these "deficiencies" carry within themselves the contradictory elements of strengths. It is the tension between these that lead to positive or negative development. In Casey's self-defeating tardiness at work, lay the seed of a healthy

desire for challenging work conditions. In the interface between affirming her need and considering the external constraints and possibilities, lay the potential for her healing and change.

While it is more important to identify the particular individual's strengths in the process of working with her, familiarity with group strengths and circumstances is helpful. Afro-Americans, for instance, have developed bicultural skills (Harrison, Serafica, & McAdoo,1984; Wilson, 1978). Hard work, strong kinship bonds, faith and patience have also seen them through years of hardship (Hines & Boyd-Franklin, 1982). For women, their ability to be close to their feelings and their caregiving skills, for example, are useful in their healing.

Damaged parents themselves are often not able to own their strengths either. Whenever Casey's achievements or her strengths in parenting were recognized, she dismissed them as insignificant or as having happened to her. These parents also often have deep insights into their own and society's operations. However, at first they are not in a position to reflect on them and to use them for their benefit. The material is too much a matter of survival to be looked at dispassionately by them. Over time, affirmation of their reality allows them to appropriate these insights and to use their own strengths and healing forces (Kovel, 1981).

Dialectics also implies that a person cannot attain personal and social goals individually, and that a positive support system has to be developed and maintained if one is to do so. This is true for more healthy people as well as for damaged parents. For

example, despite the surface societal value of independence and individualism, the significance of "old boys' networks" in professional success, is well known.

For intervention work with damaged parents, this means that individual therapy is inadequate both for the damaged parent and for the professional. Burnout, common in this field, is often a result of the heavy burden of responsibility and guilt that therapists feel when individually responsible for the healing of these parents. Team work, group therapy and parent support groups should be the modus operandi of working with damaged parents. The involvement of the more healthy elements in the family and neighborhood of these parents also becomes necessary. An analysis of healing ceremonies among the !Kung reveals that healers work with the whole community when there is a social problem. This helps people be in touch with the limits of the self, and to experience the social bonding that transcends the boundaries of the self (Cordes, 1985).

The traditional explanation for the social isolation of damaged mothers has been their negative interpersonal relationships in their own families and their resultant lack of interpersonal skills. Dialectics suggests that social factors need to be considered as well. a) The socially powerless and the most victimized in the society closely monitor their dependence on the environment as a means of limiting their powerlessness and their being pawns in a social system (Pinderhughes, 1982). Thus, it is common for damaged parents to take a long time to trust and use support systems. b) Women have more often been on the

caregiving side of relationships, so that they have more experiences with the asymmetrical and nonreciprocal aspects of social support systems(Turkington, 1985). This might mean they they are more "burned out" emotionally. In the often noted phenomena of role reversal in damaged families (Helfer, 1980; Steele, 1980),it is possible that a maltreated girl child is even more relied upon to support and uphold a damaged parent than the boy child. Thus, a maltreated girl might be more emotionally drained as a parent than a maltreated boy. c) It is also possible that single mothers (overrepresented among damaged families), having to rely more on external supports, make more nonreciprocated requests for aid (Hetherington, & Camara, 1984). Learning how to develop and maintain more symmetrical and reciprocal relationships thus becomes important in healing. d) Finally,single mothers and minorities are more likely to experience restrictive rental policies, resulting in more residential moves.

The final test of the developmental dialectical approach lies in its implementation and empirical evaluation. At this point it seems to hold promise. In the interface of all systems, be it the person and the society, the conscious and the unconscious, or one's strengths and weaknesses, lies the seeds of development. While change might be slow and incremental, the possibility of the transformation of gradual incremental change to qualitative differences holds a promise for the future of these families and our work with them.

References

Agel, J. (1971). The radical therapist. N.Y.: Ballantine Books.

Bartlett,F. (Spring-Summer, 1982). Review of Therapy with women. A feminist philosophy of treatment by S. Sturdivant. Benjamin Rush Bulletin, III (3),, 17-20.

Berglass, S. (Feb. 1985). Why did this happen to me? Psychology Today, 44-48.

Brandon,S. (1976). Physical violence in the family: An overview. In M. Borland (Ed.), Violence in the family (pp. 1-25). Atlantic Highlands, N.J.: Humanities Press.

Brill, N. & Storrow, H. (1964). Social class and psychiatric treatment. In F. Riessman, J. Cohen, & A. Pearl (Eds.) Mental Health of the Poor.(68-75). N.Y.: Free Press.

Bronfenbrenner, U., Moen, P. & Garbarino, J. (1984). Child, family & community. In R. Parke (Ed.), The Family. Review of Child Development Research. vol.7. (pp.283-328). Chicago: University of Chicago Press.

Buss, A. (1979). A dialectical psychology. N.Y.: Wiley.

Child abuse & neglect programs: Practice & theory.(1977). NIMH US DHEW Pub. No. 77-344.

Cordes, C. (Feb. 1985). Keeping the faith. Traditional healers, Western therapists forge closer ties. Psychology Monitor. 16(2), 8-10.

Elmer,E. (1967).Children in jeopardy. Pittsburgh: University of Pittsburgh Press.

Faller, K. & Russo, S. (1981). Definition and scope of the problem of child maltreatment. In Faller, K.C. (Ed.), Social

work with abused and neglected children (pp. 3-10). N.Y. : Free Press.

Garbarino, J. & Gilliam, G. (1980). Understanding abusive families. Lexington, Mass.: D.C. Heath & Co.

Gil, D.(1970). Violence against children: Physical child abuse in the U.S.Cambridge, Mass.: Harvard University Press.

Greenspan, S. (1981). Psychopathology and adaptation in infancy and early childhood.N.Y.: International University Press.

Grunebaum, H. Weiss, J., Cohler,B., Hartman, C. & Gallant, D. (1982). Mentally ill mothers & their children. Chicago: University of Chicago Press.

Harrison, A. Serafica, F. & McAdoo, H. (1984). Ethnic families. In R. Parke (Ed.), The family. Review of child development research. 7 (pp. 329-371). Chicago: University of Chicago Press.

Hegel, G. (1975). Hegel's Logic. Oxford: Clarendon Press.

Helfer, R. (1980). Developmental deficits which limit interpersonal skills.In C. Kempe & R. Helfer (Eds.), The battered child (pp.36-48), Chicago: University of Chicago Press.

Hetherington, M. & Camara, K. (1984). Families in transition: The processes of dissolution & reconstitution. In R. Parke (Ed.), The Family. Review of child development research. 7. (pp.308-431). Chicago: University of Chicago Press.

Hines, P.& Boyd-Franklin (1982). Black families. In M. McGoldrick, J. Pearce, & J. Giordono (Eds.), Ethnicity and family therapy. N.Y.: Guilford Press.

Kotelchuck, M. (1982). Child abuse & neglect: Prediction & misclassification. in R. Starr (Ed.), Child abuse predictions: Policy implications (pp.67-104). Cambridge, Mass.: Ballinger Publishing Co.

Kovel, J. (1981). The age of desire. N.Y.: Pantheon Books.

Lichtman, R. (1984). The production of desire. Issues in radical therapy, 11 (3), 14-17 & 60-65.

Lundberg, M. (1974). The incomplete adult. Westport, Conn.: Greenwood Press.

Oliver, J. (1978). The epidemiology of child abuse. In S. Smith (Ed.), The maltreatment of children (pp.95-119). Baltimore: University Park Press.

Oliver, J. Cox,J.& Buchanan, A. (1978). The extent of child abuse. In S. Smith (Ed.), The maltreatment of children (pp. 121-175). Baltimore: University Park Press.

Pakizegi, B. (1985). Maladaptive parent infant relationships. Journal of Applied Developmental Psychology, 6, in press.

Pelton, L. (1981). Child abuse and neglect: The myth of classlessness. In L. Pelton (Ed.), The social context of child abuse and neglect (pp.90-136). N.Y.: Human Science Press.

Pinderhughes, E. (1982). Afro-American families and the victim system. In M. McGoldrick, J. Pearce, & J. Giordono (Eds.), Ethnicity & family therapy. N.Y.: Guilford Press.

Polansky, N., Chalmers, M., Buttonweiser, E. & Williams, D. (1981). Damaged parents: An anatomy of child neglect.

Chicago: University of Chicago Press.

Riegel, K. (1975). Toward a dialectical theory of development. Human Development,18,50-64.

Riegel, K. (1976). The dialectics of human development. American Psychologist, 31, 689-700.

Sipe, R. (1984). Reification in everyday life. Issues in radical therapy. 11(3), 20-25 & 48-56.

Steele, B. (1980). Psychodynamic factors in child abuse. In C. Kempe & Helfer (Eds.), The battered child (pp.49-85). Chicago: University of Chicago Press.

Stone, M. (1979) Upbringing in the super-rich. in J. Howells (Ed.),Modern perspectives in the psychiatry of infancy (pp.325-339). N.Y.: Brunner/Mazel.

Turkington, C. (Feb. 1985). What price friendship? The darker side of social networks. Psychology Monitor, 16(2), 38 & 41.

Veroff,J., Douvan, E. & Kulka, R. (1981). The inner American. N.Y.: Basic Books.

Watts, A. (1961). Psychotherapy East & West. N.Y.: Ballantine Books.

Wiehe, V. (March 1985). Empathy & locus of control in child abusers. Presented at Parenting Symposium, Chicago, Ill.

Wilson, A. (1978). The developmental psychology of the black child. N.Y.: Africana Research Publications.

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